

Permit Refund Request

Please Note:

Refunds will only be made to the original payor of the permit fees. Fax request to (480) 782-3055

| Permit No. to be Refunded: | Date Issued: |
|---|--------------------|
| Project Name | |
| Project Address: | |
| Reason for Refund Request: | |
| Person Requesting Refund: | |
| Mailing Address: | |
| Company Name (if applicable): | |
| Company Address: | |
| Company Phone No. | Company Fax No.: |
| E-mail address (for refund confirmation) | |
| I agree to destroy the permit and the related orange card when the refund is granted. | |
| Requestor | Date |
| For Office Use Only: | Refund Invoice No. |
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